



**APPLICATION INSTRUCTIONS FOR  
TYPE II (LEVEL 5) LIMITED (D), COMPLETE (F), AND DISTRIBUTION (S)  
MUNICIPAL DRINKING WATER CERTIFICATION EXAMS**

**APPLICANTS PAYING BY CHECK MUST SUBMIT APPLICATIONS NO LATER THAN 60 DAYS PRIOR TO THE EXAMINATION DATE.**

**APPLICANTS PAYING BY CREDIT CARD MUST SUBMIT APPLICATIONS NO LATER THAN 30 DAYS PRIOR TO THE EXAMINATION DATE.**

**A COMPLETE LIST OF EXAM DATES AND POST MARK DEADLINES IS AVAILABLE AT  
[Michigan.gov/EGLEOperatorTraining](http://Michigan.gov/EGLEOperatorTraining)  
(Listed under exam applications and study guides)**

**LATE APPLICATIONS WILL NOT BE ACCEPTED**

**NOTE:**

The United States Postal Service postmark or a postmark from an independent delivery service (U.P.S., Federal Express) will be used to verify that the application has met the deadline for submission. Postmarks by private meter stamps (such as Pitney Bowes) cannot be used as proof of meeting the deadline. **DO NOT wait until the deadline date to apply.**

Applicants must complete the application with the required signatures. Signatures must be original and authentic. **Faxed, emailed, or copied exam applications WILL NOT be accepted.**

**Incomplete applications will be denied.**

**DRINKING WATER EXAM LOCATIONS:**

On the application, please indicate the preferred location of examination and alternate choices. Applicants will be assigned to the location/region requested on a first come first serve basis. Some exam sites have limited seating, and reassignments may be necessary.

**INSTRUCTIONS FOR COMPLETING EXAM APPLICATIONS:**

- Page 1: Fill out contact information completely, indicate any related certifications held, and circle the classification level(s) you wish to take. Prior approvals, as defined on page 1 of the application, only need to submit the first page of the application.
- Page 2: Fill out the education information completely. If you do not have a minimum high school diploma or GED equivalent, you may not be eligible to write any of the exams. If you do not meet the minimum education qualifications, please call 517-284-5424 to discuss your options prior to mailing your application and payment.

**DO NOT INCLUDE THIS PAGE WITH YOUR SUBMITTED APPLICATION**



## **Instructions for Payment of Examination Fees**

**The fees for Level 5 Type II Drinking Water Certification Exams are:**

- **D5, F5, or S5 - \$45.00 per exam** (Make Checks Payable to: State of Michigan)
- **Payment by credit card is now accepted online at the following website:**  
[www.thepayplace.com/mi/deq/trainandcertify](http://www.thepayplace.com/mi/deq/trainandcertify)

A separate examination fee is required for all examinations an individual applies for, and payment is due upon submission of the application. Applicants **WILL NOT** be allowed to write an exam unless fees have been received by the State.

A certified operator will not be allowed to write an examination for a certification that they currently hold.

**No refunds will be given for any reason (such as denials, cancellations, no shows, etc.)**

**COMPLETED APPLICATIONS, WITH ORIGINAL SIGNATURE AND FEE PAYMENT/  
CREDIT CARD RECEIPT, MUST BE MAILED TO THE FOLLOWING ADDRESSES  
DEPENDENT ON PAYMENT TYPE.**

<p>When paying online, please mail a copy of the payment receipt, the ORIGINAL application, and all documentation to the address below.</p> <p><b>DO NOT MAIL CHECKS TO THIS ADDRESS:</b></p> <p><b>EGLE</b> <b>Drinking Water and</b> <b>Environmental Health Division</b> <b>Operator Training and</b> <b>Certification Unit</b> <b>PO BOX 30817</b> <b>Lansing, Michigan 48909-8311</b></p>	<p>To pay by check, please mail this application, all documentation, and appropriate fees to the address below.</p> <p><b>Make checks payable to:</b> <b>State of Michigan</b></p> <p><b>EGLE</b> <b>Office of Financial Management</b> <b>Revenue Control/Cashier's Office</b> <b>PO BOX 30657</b> <b>Lansing, Michigan 48909-8157</b></p>	<p>For overnight or express delivery, please send check, application, and all documentation to the address below.</p> <p><b>Make checks payable to:</b> <b>State of Michigan</b></p> <p><b>MDOT Accounting Service</b> <b>Center 425 West Ottawa Street</b> <b>Lansing, Michigan 48933</b></p>
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**FAXED, COPIED, OR EMAILED APPLICATIONS WILL NOT BE ACCEPTED.**

**ADDITIONAL APPLICATIONS MAY BE DOWNLOADED AT [Michigan.gov/EGLEOperatorTraining](http://Michigan.gov/EGLEOperatorTraining).**

You may receive acknowledgment from the Department of Environmental Quality of **receipt of your application** by enclosing a **SELF-ADDRESSED, STAMPED POSTCARD** with your application. We will date stamp the card and mail it back to you. This does not indicate acceptance to the examination; only receipt of your application.

**ALL APPLICANTS WILL BE NOTIFIED OF ACCEPTANCE OR DENIAL OF THE WRITTEN EXAMINATION NO LESS THAN 15 DAYS BEFORE THE DATE OF THE EXAMINATION**

**DO NOT INCLUDE THIS PAGE WITH YOUR SUBMITTED APPLICATION**



Michigan Department of Environment, Great Lakes, and Energy  
Drinking Water and Environmental Health Division

## APPLICATION FOR LEVEL 5 CERTIFICATION

*This information is required by authority of the Michigan Safe Drinking Water Act, 1976 PA 399, as amended.*

**GENERAL INFORMATION** - Provide complete contact information and education information. *Sign the application on page 1. The application must be received no fewer than 60 days prior to the announced examination date if paying by check or money order, 30 days if paying by credit card.*

### TYPE, PRINT, OR WRITE LEGIBLY

NAME: (First) (Middle Initial) (Last)			Operator ID: (If Known)	
ADDRESS: (Number and Street) (Apartment Number)		CITY:	STATE:	ZIP CODE:
EMAIL ADDRESS:		HOME PHONE NUMBER: ( )	BUSINESS PHONE NUMBER: ( )	
LIST ANY EGLE DRINKING WATER CERTIFICATE(S) HELD:		CIRCLE CERTIFICATE(S) APPLIED FOR WITH THIS APPLICATION <b>D-5 F-5 S-5</b>		
EMPLOYER (Name)		WSSN NUMBER	PHONE NUMBER ( )	
ADDRESS (Number and Street) (City) (State) (Zip Code)			FAX NUMBER ( )	

### CERTIFICATION OF APPLICANT:

I certify that all information provided in this application and attachments (if any) is accurate and complete. I understand that misstatement of facts may result in forfeiture of all rights to certification. I further certify that I have read and understand the instruction for payment of examination fees and I am responsible for an examination fee of \$45 for each exam applied for. I further understand there are **NO REFUNDS**.

SIGNATURE:	DATE:
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**EXAMINATION LOCATION:** I PREFER TO TAKE THE WRITTEN EXAMINATION NEAR  
Indicate 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice. If the site you select is full, you will be moved.

- ☐ ALLEN PARK   ☐ DETROIT   ☐ FLINT   ☐ GAYLORD   ☐ HOLLAND  
☐ KALAMAZOO   ☐ LANSING   ☐ MARQUETTE   ☐ PORT HURON   ☐ YPSILANTI

It is recommended that you make a copy of the completed application for your records. If you would like confirmation that EGLE received your application; please include a self-addressed & stamped postcard.

**Submit completed application form and examination fee of: \$45**

<p>When paying online at the <a href="http://www.thepayplace.com/mi/deq/trainandcertify">online payment site</a> (www.thepayplace.com/mi/deq/trainandcertify)</p> <p>Please mail a copy of the payment receipt, the ORIGINAL application, and all documentation to the address below.</p> <p><b>DO NOT MAIL CHECKS TO THIS ADDRESS:</b></p> <p><b>EGLE</b> Drinking Water and Environmental Health Division Operator Training and Certification P.O. BOX 30817 Lansing, Michigan 48909-8311</p>	<p>To pay by check, please mail this application, all documentation and appropriate fees of <b>\$70.00</b> the address below.</p> <p><b>Make checks payable to:</b> <b>State of Michigan</b></p> <p><b>EGLE</b> Office of Financial Management Revenue Control/Cashier's Office P.O. BOX 30657 Lansing, Michigan 48909-8157</p>	<p>For overnight or express delivery, please send check/credit card receipt, application and all documentation to the address below.</p> <p><b>Make checks payable to (if applicable):</b> <b>State of Michigan</b></p> <p><b>MDOT Accounting Service Center</b> 425 West Ottawa Street Lansing, Michigan 48933</p> <p>For Cashier's Use Only: DWF</p>
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If you do not have a minimum high school diploma or GED equivalent, you may not be eligible to write any of the exams. If you do not meet the minimum education qualifications, please call 517-284-5424 to discuss your options prior to mailing your application and payment.

EDUCATIONAL QUALIFICATIONS						
HIGH SCHOOL (Name)		(Location)		CIRCLE HIGHEST GRADE COMPLETED		
				10	11	12
HIGH SCHOOL GED or EQUIVALENT		(Name)		(Location)		
OTHER TRAINING AND EDUCATION – <b>(Complete this section only if you DO NOT have a High School Diploma, GED, or Equivalent)</b> List short courses, seminars, regional meetings, correspondence courses, and other MDEQ Advisory Board Approved training. List any other in-service training courses, extension courses, or individual college courses not part of your degree program. Give title of course, location, subject, instructor, and other information necessary for evaluation and determination of credit to be allowed. Indicate credit earned by filling out either the class hour's column or the Continuing Education Credit's (CEC) column. Verification may be required.						
COURSE TITLE	LOCATION	SUBJECT	INSTRUCTOR	YEAR	CLASSROOM HOURS	CEC's

IF ADDITIONAL SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER HEADED WITH NAME AND DATE

**Authority Governing the Certification of Water Works Personnel in Accordance with State Law and Administrative Rules**  
(Excerpts from the Act and Rules as Amended 12/4/2009)  
SAFE DRINKING WATER ACT – 1976 PA 399, as amended

AN ACT to protect the public health; to provide for supervision and control over public water supplies; to prescribe the powers and duties of the department of environmental quality, to provide for the submission of plans and specifications for waterworks systems and the issuance of construction permits therefore; to provide for the classification of public water supplies and the examination, certification and regulation of persons operating those systems; to provide for continuous, adequate operation of privately owned, public water supplies; to authorize the promulgation of rules to carry out the intent of the act, and to provide penalties.

Sec. 9 (1) The department shall classify water treatment and distribution systems with regard to size, type, location, and other physical conditions for the purpose of establishing the skill, knowledge, and experience that individuals need to maintain and operate the systems effectively.

(4) For individuals meeting the requirements, the department shall issue certificates acknowledging their competency to operate a specified class of waterworks system or portion thereof. The department may suspend or revoke a certificate as specified by rule.

(5) A water treatment and distribution system shall be under the supervision of a properly certified operator as specified in the rules.

**THE RULES TO IMPLEMENT ACT NO. 399, P.A. 1976 R 325.10101 TO R 325.12606**

**R 325.11901** Classification of treatment systems.

Rule 1901. (1) Complete treatment systems are classified based on population served by the public water supply or rated treatment capacity of the treatment system as follows:

- (e) Class F-5: Complete treatment systems for noncommunity supplies.
- (2) Limited treatment systems are classified based on population served by the public water supply or rated treatment capacity of the treatment system as follows:
  - (e) Class D-5: Limited treatment systems for noncommunity supplies.
- (3) Waterworks systems that use as a source surface water or ground water under the direct influence of surface water shall be classified as F systems.

**R 325.11902** Classification of distribution systems and other public water supplies. Rule 1902. The following classifications are assigned to public water supplies:

- (e) Class S-5: Nontransient noncommunity water supplies with no treatment or community supplies with no treatment and a distribution system limited in extent.

**R 325.1195**

Rule 1915. (1) The department shall renew a certificate on a 3-year cycle.

- (2) To have a Class F-5, Class D-5, or Class S-5 certificate renewed, a certificate holder shall have completed not less than 9 hours of advisory board-approved training or continuing education during the renewal cycle.